

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

AUG 19 2005

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>17044</u>	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Ryan N Boyer P.O. Box, Bldg., Room No., if any Street 1310 Wallace Street City Philadelphia State Pennsylvania ZIP Code + 4 19123	4. Name, file number, and address of labor organization. Name LIUNA Local Union #332 Labor Organization File Number 022-168 P O. Box, Building and Room Number, if any Street 1310 Wallace Street City Philadelphia State Pennsylvania ZIP Code + 4 19123
5. Position in labor organization. Secretary-Treasurer	

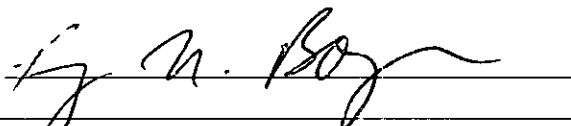
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed



On

8/15/05

Date

215-765-6272 x122

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>LDC Education & Training Fund</u></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any <u>PO Box 37003</u></p> <p>Street</p> <p>City <u>Philadelphia</u></p> <p>State <u>Pennsylvania</u> ZIP Code + 4 <u>19122</u></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name</p> <p>Name <u>Same</u></p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p><u>Attended training session on behalf of the members of LIUNA Local Union #332.</u></p>
	<p>11.b. Approximate dollar value of such dealing. \$0</p>
	<p>12.a. Nature of interest held or income received.</p> <p><u>Airfare, and Hotel stay during training 10/2004.</u></p> <p>12.b. Amount. \$983</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing Ryan Boyer

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name PNC Bank

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1900 Market Street

City Philadelphia

State Pennsylvania ZIP Code + 4 19103

9. Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name

Name LIUNA Local Union #332

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1310 Wallace Street

City Philadelphia

State Pennsylvania ZIP Code + 4 19123

11.a. Nature of such dealing.

Depository relationship.

11.b. Approximate dollar value of such dealing. \$150,000

12.a. Nature of interest held or income received.

Philadelphia Flower show tickets 5/2004.

12.b. Amount. \$180

ADDENDUM

This report is being made with a good faith recollection of reportable events and/or benefits but without complete records.